# APPLICATION FOR CONTRACTOR AND SUBCONTRACTOR ANNUAL PREQUALIFICATION



Office of Management and Budget Ann S. Visalli, Director

#### **OVERVIEW**

#### **INTRODUCTION**

Pursuant to Section 6962(c), Title 29 of the <u>Delaware Code</u>, the Office of Management and Budget has established a two-step process for the annual prequalification of contractors and subcontractors that elect to bid on large public works contracts for which prequalification is specified by the contracting agency. The annual prequalification process encompasses the following two steps:

- Annual Prequalification The first step in the prequalification process that enables applicants to submit financial information and work/project history that the Department will use to assign one or more work classifications and bidding dollar limits. Annual prequalification remains valid for twelve calendar months from the time a contractor or subcontractor becomes prequalified by the Department.
- 2) **Supplemental Prequalification** The second step in the process that enables prequalified contractors and subcontractors to provide a limited scope of information that is *specific to a single project*. Supplemental prequalification does not require the resubmission of information provided to the Department as part of annual prequalification.

#### **ANNUAL PREQUALFICATION**

The prequalification classification issued by the Department, as part one of the prequalification process, is valid for a period of twelve months. It is the prequalified contractor's or subcontractor's responsibility to reapply for prequalification before the twelve-month period has expired in order to remain prequalified. The Department will <u>not</u> notify contractors or subcontractors of the impending expiration of prequalification.

The Department will prequalify contractors and subcontractors on the basis of information submitted as part of the Annual Prequalification process. Prequalified contractors and subcontractors will be assigned a classification (trade) and maximum contract dollar value for which they may submit bids. The Department will notify prequalification applicants of the Department's decision, in writing, within five business day of a determination. An applicant may request a review of the outcome of its application for prequalification by sending a written request to the Director of the Office of Management and Budget within five business days of receipt of the Department's notification.

The Department will maintain a registry of all contractors and subcontractors prequalified to bid on public works contracts. The registry will include the name and address of the contractor or subcontractor, the classification(s) and the maximum contract dollar value(s) for which the contractor or subcontractor may submit a bid, the prequalification expiration date and any determination of supplemental prequalification status. This registry will be posted on the Division of Facilities Management's website at http://dfm.delaware.gov. All other information submitted by contractors or subcontractors will remain confidential to the fullest extent allowed by law.

#### SUPPLEMENTAL PREQUALFICATION

Every large public works contract for which prequalified contractors and subcontractors are specified will require supplemental prequalification. The information requested as part of supplemental prequalification will be **specific to an individual project** and will not duplicate the information requested as part of annual prequalification.

Supplemental prequalification for school district projects may be administered by either the Department or the School District. However, all applications for annual prequalification will be received by the Department.

A contractor or subcontractor must be prequalified under annual prequalification to apply for supplemental prequalification. However, an applicant **may** submit applications for both annual and supplemental prequalification at the same time.

The Department or school district (in the case of supplemental prequalification administered by a school district) will notify all applicants for supplemental prequalification of its determination 14 calendar days prior to the closing date of a bid for a specific project. However, this requirement will apply only if the Department receives the application for supplemental prequalification at least 28 days prior to the closing date of the bid. An applicant may request a review of the outcome of its application for supplemental prequalification by sending a written request to the Director of the Office of Management and Budget, or in the case of supplemental prequalification administered by a school district school, to the district superintendent within five business days of the receipt of the Department's or school district's notification.

#### GENERAL INFORMATION

- 1. The application for contractor/subcontractor annual prequalification may be obtained by calling the Division of Facilities Management at (302) 739-5644 (will be sent via U.S. Mail), or may be obtained on-line by visiting our website at http://dfm.delaware.gov.
- 2. The application is divided into two parts. Answer all questions completely. **Incomplete applications may delay prequalification or may result in the denial of prequalification**. Submit one original, signed copy of the application.
- 3. Part 1 of the application, *General Information*, requires the submission of organizational and financial information. The financial information specified includes a request for an applicant's "Z" Score. Information regarding Z Score, its purpose and determination can be obtained at www.creditworthy.com/topics/zscore.html.
- 4. Part 2 of the application, *Contractor/Subcontractor Classification and Determination of Maximum Contract Dollar Value*, requires the submission of information related to projects completed by the applicant. The determination of maximum contract value (and the maximum value of bids that may be submitted for large public works contracts) may be affected by the number of completed projects submitted under Part 2 of the application. Please see Section 5.0 of the regulations for annual prequalification for additional information. The regulations are available online at http://dfm.delaware.gov.
- 5. A separate Part 2 application must be submitted for each classification for which the applicant seeks prequalification.

6. Mail completed applications to: Division of Facilities Management

ATTN: CSAP Committee 540 S. DuPont Highway, Suite 1 Dover, DE 19901

- 7. Faxed applications will not be accepted.
- 8. Notice of the Department's determination will be made in writing within five business days of such determination.
- 9. The prequalification classification issued by the Department shall be valid for twelve months from notice of prequalification issued by the Department. It is the contractor's or subcontractor's responsibility to reapply for prequalification prior to the expiration of the twelve month period to ensure uninterrupted prequalification. The Department will not notify contractors or subcontractors of the impending expiration of prequalification status.
- 10. A prequalified contractor or subcontractor shall report any material changes that could adversely affect prequalification status to the Department within ten days of the material

- change. Notification must be submitted to the Department in writing and shall be signed by an officer of the organization.
- 11. The Department will maintain a registry of all contractors and subcontractors prequalified to bid on large public works contracts. The registry will include the name and address of the contractor or subcontractor, the classification(s) and the maximum contract dollar value(s) for which the contractor or subcontractor may submit a bid, the expiration date of annual prequalification and any determination of supplemental prequalification status. This registry will be posted on the Division of Facilities Management's website at http://dfm.delaware.gov. All other information submitted by contractors or subcontractors will remain confidential to the fullest extent allowed by law.

Instructions and Information for Completing Parts 1 and 2 of Application for Contractor/Subcontractor Annual Prequalification:

#### <u>PART 1</u> – GENERAL INFORMATION

• Complete all questions completely and accurately. Please type or print legibly. Submit one original copy.

### <u>PART 2</u> – CONTRACTOR/SUBCONTRACTOR CLASSIFICATION DETERMINATION OF MAXIMUM CONTRACT DOLLAR VALUE

#### **Classification**

- For each classification requested, the contractor must submit a separate Part 2 of the form. (For example: if a contractor is submitting information to be classified as a General Contractor and a Carpentry Subcontractor, Part 2 must be completed for the General Contractor classification and then a separate Part 2 must be completed for the Carpentry Subcontractor classification.)
  - **IMPORTANT NOTE**: Although a General Contractor may be prequalified for other classifications through this process, there are other requirements detailed in Title 29, Section 6962(d)(10)b of the <u>Delaware Code</u> which control a General Contractor's ability to list themselves for more than one category on the Subcontractor's List of the Bid Form. Where necessary, these other requirements are evaluated on a case-by-case basis during the bid process.
- A list of the classifications (trades) for which the Department is accepting prequalification applications is provided in this section. On each application, please indicate the appropriate classification for prequalification by placing an "X" in the box next to that classification. Please see the regulations for annual prequalification for additional information concerning the classifications for which the Department is accepting applications. The regulations are available online at http://dfm.delaware.gov.

#### **Classification Definitions:**

**Carpentry**: Performs all types of framing and finish carpentry work.

**Concrete**: Performs all phases of concrete work including form, placement and finish work.

**Controls**: Performs commercial HVAC control work.

**Electric Power**: Performs commercial electrical work in a building including wiring, new panels, etc. (must be Delaware licensed).

**Flooring**: Performs floor preparation and installation of sheetgood, vinyl tile, ceramic tile and carpet.

**General Construction**: Provides oversight for all phases of a project; must have superintendent and/or foreman on payroll.

**Masonry**: Performs masonry work including brick, block, split block, stone work, grouting and minor concrete work.

**Mechanical**: Performs mechanical installations including boilers, heat pumps, air handling units, air conditioning systems, dehumidification and humidification systems in a commercial building.

**Painting/Wallcovering**: Performs interior/exterior painting with latex, oil and epoxy and wallpaper applications.

**Plumbing**: Performs plumbing work in a commercial building (must be a Delaware licensed plumbing contractor). Includes installation of water, gas and waste lines.

**Roofing**: Performs flat roof work on commercial buildings including EPDM and built-up, and sloped roofing systems including asphalt shingles.

**Site Work**: Performs excavation, grading, foundation preparation, parking lot preparation, drainage areas, retention ponds, etc. Must have current DNREC certifications to meet qualifications.

**Steel Erection**: Performs installation and erection of steel for commercial structures (including welding).

**Testing & Balancing**: Performs testing of various HVAC systems and adjusts them to achieve optimum performance. Firm must be NEBB or AABC certified for both air and hydronic (water).

#### **Maximum Contract Dollar Value**

- The maximum contract dollar value assigned to a contractor for a particular classification represents the maximum amount for which the contractor or subcontractor may submit a bid. Additional regulations may apply. Please see the regulations for annual prequalification for additional information. The regulations are available online at http://dfm.delaware.gov.
- Maximum contract dollar value is based on the dollar value of completed projects submitted as part of this application as evidence of prior experience. With certain exceptions, a prequalified contractor or subcontractor may not submit bids on projects where prequalification is required and the estimated contract value exceeds the maximum contract dollar value assigned by the Department. Please see the regulations for annual prequalification for more information.
- For each classification in which an applicant seeks prequalification, the applicant shall provide documentation that he, she or it has the experience and expertise to perform the work and provide the services, labor, material, supplies or equipment generally associated with that classification.
- To enable the Department to assign maximum contract dollar value, acceptable documentation is limited to the following:
  - 1. A copy of an executed contract or subcontract and all change orders that increase or decrease the value of the submitted contract or subcontract, or;
  - 2. A schedule of all work, services, labor, materials, supplies and equipment associated with a specific project or projects, with signed final payment application, or;
  - 3. A certified letter from the owner associated with a project submitted as documentation under Part 2 of the prequalification application.

#### Office of Management and Budget Division of Facilities Management

#### **Application For Contractor/Subcontractor Annual Prequalification**

#### Part 1: General Information

Submitted by:				
Name and Add	dress:			
Principal Offic	ce Location:			
Phone Number	r:			
Fax Number:				
E-mail Addres	s:			
Website Addre	ess:			
Delaware Busi	iness License Number:			
Federal E.I. N	umber:			
Please indicate	e if either of the following	categories apply to your l	ousiness:	
	Minority-Owned Busin	ness Enterprise		
	Delaware certified throu	gh Office of Minority and	d Women Business Enterprise	
	☐ Yes - Certification N	No	No	
	Women-Owned Busine	ess Enterprise		
	Delaware certified throu	gh Office of Minority and	d Women Business Enterprise	
	☐ Yes - Certification N	0	No	
			ganization is eligible to be certiful are encouraged to apply for contact of the	

enterprises, please visit http://omwbe.delaware.gov/.

Addendum A). For more information on the certification of minority- and women-owned business

If yo	ur organization is a corporation, please answer the following:
a.	Date of incorporation
b.	State of incorporation
c.	
If yo	ur organization is a partnership, please answer the following:
a.	Date of organization
b.	Type of partnership
c.	Names of partners
If yo	ur organization is individually owned, please answer the following:
•	Date of organization
a.	
a. b.	Date of organization
a. b. List	Date of organization Name of owner trade certifications, if applicable:
a. b. List	Date of organization Name of owner trade certifications, if applicable:
a. b. List	Date of organization Name of owner trade certifications, if applicable:  ms and Suits
a. b. List	Date of organization Name of owner trade certifications, if applicable:  ms and Suits
a. b. List t	Date of organization Name of owner  trade certifications, if applicable:  Instany debarment or suspension by any government agency; please explain:  List any revocation or suspension of a license; please explain:
a. b. List t	Date of organization Name of owner  trade certifications, if applicable:  ms and Suits  List any debarment or suspension by any government agency; please explain:

- 8. Submit a letter from your bonding company (must be on bonding company's letterhead) indicating the total maximum bonding capacity allowed for the trade or type of work you are applying to be prequalified for.
- 9. Submit the most recent audited financial statement and/or financial statement review containing a complete statement of your organization's financial status.
- 10. As part of the financial statement mentioned in #9 above, on a separate sheet of paper, include your organization's "Z" Score. The "Z" Score must be computed by the same firm that supplied the review of your financial statement or other recognized financial consultant. You must show all formulas and calculations used in computing your "Z" Score. (Information regarding "Z" Score can be obtained at www.creditworthy.com/topics/zscore.html).

**PLEASE NOTE:** A "Z" Score less than 2.5 is grounds for automatic denial of prequalification. If a "Z" Score is between 2.5 and 3.0, we may request additional financial information to evaluate your status.

#### Annual Prequalification - Part 2: Contractor/Subcontractor Classification and Determination of Maximum Contract Dollar Value

Submitted by:	
Name and Address:	
Federal E.I. Number:	
Contractor/Subcontractor Classification	n (See classification definitions in Overview and
Instructions section)	
box next to that trade or type of work. <b>D</b> Part 2 - Application for Contractor/Subc trade or type of work you are attempting p	•
If this prequalification application is being the following information:	g submitted in response to a specific project, then please provide
☐ Project Title:	
Classification	Years of experience as a contractor in this trade
(check one)	
☐ Carpentry ☐ Concrete ☐ Controls ☐ Electric Power ☐ Flooring ☐ General Construction ☐ Masonry ☐ Mechanical ☐ Mechanical/Plumbing ☐ Painting/Wallcovering ☐ Plumbing ☐ Roofing ☐ Site Work ☐ Steel Erection ☐ Testing & Balancing	
Provide license number for the noted trad	e, if applicable:

#### **Project Information**

- Submit a separate Part 2 application for each classification requested.
- The maximum contract dollar value assigned by the Department will be higher if two or more completed projects are presented as examples of prior experience.
- Please see the regulations for annual prequalification for further information. The regulations can be obtained at http://dfm.delaware.gov.

			Project 1	
1.	Projec	ct Name:		
2.	Projec			
3.	Projec	ct Duration:		
4.	Year (	Completed:		
5a.	Dollar	r Value:		
5b.		r value based on (check one): mentation.)	(See Section 5.5 of the Regulations for accept	otable forms of
		Copy of an executed contract value of the submitted contract	or subcontract and all change orders that increase	or decrease the
			vices, labor, materials, supplies and equipment as ith signed final payment application	sociated with a
			verifying the total contract dollar value of all work, nent associated with a specific project or projects	services, labor,
6.	Owne	er Name and Address:		
7.		tect and/or Engineer and Address:		
8.	Descr	ription of Project:		

 $(Attach\ additional\ pages\ if\ necessary)$ 

#### **Project 2**

1.	Proje	ect Name:		
2.	Proje	ect Location:		
3.	Proje	ect Duration:		
4.	Year	· Completed:		
5a.	Dolla	ar Value:		
5b.		ar value based on (check of mentation.)	ne): (See Section 5.5 of the Regulations for accep	otable forms of
		Copy of an executed cont value of the submitted con	ract or subcontract and all change orders that increase tract	or decrease the
			services, labor, materials, supplies and equipment ass, with signed final payment application	sociated with a
			oner verifying the total contract dollar value of all work, nipment associated with a specific project or projects	services, labor,
6.	Owne	er Name and Address:		
7.		nitect and/or Engineer te and Address:		
8.	Desci	ription of Project:		

(Attach additional pages if necessary)

This o	ualification	statement	must	be:	signed	bv:	an officer	/owner	of the	comp	anv	V.

':				
	ted Name)	)		
/ TP: 41	`			
(Title	)			
( Auth	orized Sigr	nature )		
te:				





#### **State of Delaware**

#### Office of Minority and Women Business Enterprise Certification Application



#### Complete application and mail to:

Office of Minority and Women Business Enterprise (OMWBE)
Haslet Armory
122 William Penn Street
Dover, DE 19901

Telephone: (302)739-4206 Fax: (302)739-1965 Email: deomwbe@state.de.us Website: http://omwbe.delaware.gov/

## Important Information Please Read!

#### Is my firm eligible?

A minority and/or women owned business (sole-proprietorship, partnership, corporation or joint venture) must meet the following criteria:

- a) Minority groups include: African Americans, Asian/Pacific Americans, Hispanic Americans, Native Americans, and Subcontinent Asian Americans.
- b) At least 51 percent owned, controlled and actively managed by minority group members or by women.
- c) Serving a for profit business with "useful business functions."
- An out-of-state company must first **be certified in its home state** before it can be considered for certification in Delaware. This must be a state-level certification, if available.
- There is no fee for processing your application. In addition, free assistance is available. If you have questions about the application or your company's qualifications, call (302)739-4206.
- If your business is certified by **Delaware Department of Transportation (DelDOT) City of Wilmington, Minority Supplier Development Council (MSDC), Women Business Enterprise National Council**(**WBENC) and located in Delaware**, there is a specialized application. You must also attach a copy of your certification and mail all documents to the OMWBE.
- Also, please note that it is extremely important to provide other certifying agency documentation. This can expedite the certification process.

#### **Document Request checklist**

- Unless otherwise indicated, copies of documents are sufficient.
- Any deficiency may delay the certification process.
- Certification generally takes four to six weeks.
- **An on-site visit.** (The OMWBE office may schedule an on-site visit once the completed application and appropriate supporting documentation have been received).

Documents to attach to your application	Sole	Part/	Corp/	LLC	OMWB
	Prop	LLP	S-Corp		E Use
Notarized Minority and Women Business Enterprise	Yes	Yes	Yes	Yes	
Affidavit form					
Copy of birth certificate, permanent resident card, passport	Yes	Yes	Yes	Yes	
or tribal memberships					
Last two years of your firm's tax returns (gross receipts). If not	Yes	Yes	Yes	Yes	
available, last two years W2 and/or 1099 forms for all					
owners, directors, officers and senior management.					
Copy of MBE/WBE certification from home state, if	Yes	Yes	Yes	Yes	
company headquarters are not in Delaware. (must be a state					
level certification, if available)					
Copies of any relevant licenses, certificates of training and	Yes	Yes	Yes	Yes	
degrees held by the company or its owners/employees					
Partnership Agreement, including any amendments, buy-		Yes			
out rights as well as any profit sharing arrangements					
Articles of Incorporation with all amendments		Yes			
Minutes of the last annual shareholders meeting		Yes			
By-laws and By-law Amendments		Yes			
Copy of most recent Stock Ledger		Yes			
Copy of Certificate of Organization				Yes	
Copy of Operating Agreement				Yes	

#### Delaware Minority and/or Women Business Enterprise Certification

#### **Certification Application**

The following is the application for Minority and/or Women Business Enterprise (MWBE) certification with the State of Delaware. All questions must be answered. Please type or print clearly.

# Questions that do not apply to your firm should be marked N/A in the space provided.

The Affidavit on page 14 must be signed and notarized by a Notary Public. Faxed copies of the Affidavit will only be accepted if the notary seal has the stamped seal with the expiration date visible. Otherwise, mail the original Affidavit with the raised seal to our office.

Please return the completed application with signature and required notarization to the address below:

Office of Minority and Women Business Enterprise Haslet Armory 122 William Penn Street Dover, DE 19901

Phone: (302) 739-4206 Fax: (302) 739-1965

Web site: http://omwbe.delaware.gov/

#### **Definitions**

## Minority and/or Women Business Enterprise

A Minority and Women Business Enterprise is a business that is at least 51 percent owned, controlled and actively managed by minority and/or women group members who are United States citizens or persons lawfully admitted to the United States for permanent residence.

The business must be a for-profit business and currently be performing a useful function.

Minorities – United States citizens or permanent residents who are African Americans, Asian/Pacific Americans, Hispanic Americans, Native Americans, Subcontinent Asian Americans, or as defined herein:

African (Black) Americans. All persons having origins from any of the Black groups of Africa and all persons having origins in any of the original peoples of the Cape Verde Islands.

Asian/Pacific Americans. All persons having origins from any of the original peoples of the Far East, Asia, or the Pacific Islands, including China, Japan, Korea, Samoa, Philippine Islands, and Hawaii. Guam, the U.S. Trust Territories of the Pacific or the Northern Marinas.

**Hispanic Americans.** Persons having origins from any of the Spanish-speaking peoples of México, Puerto Rico, Cuba, Central or South America, or the Caribbean Islands.

**Native Americans.** All persons having origins from the original peoples of North America and who are recognized as Native Americans by a tribe or tribal organization.

**Subcontinent Asian Americans.** All persons whose ancestors originated in India, Pakistan or Bangladesh.

**Certification -** A determination by the OMWBE that a for-profit business entity is a Minority Business Enterprise (MBE) and/or Women Business Enterprise (WBE).

#### **Definitions**

#### **Ownership**

The minority or woman ownership interest in the firm must be real, substantial and continuing and shall go beyond the pro forma ownership of the business as reflected in its ownership documents. The minority and women owners shall enjoy the customary incidents of ownership and shall share in the risks and profits commensurate with their ownership interest as demonstrated both by an examination of the substance and form of arrangements.

#### **Control**

Control will be exemplified by possession of the requisite knowledge and expertise to run the particular business. Control includes the authority to determine the direction of a business, including but not limited to capital investments and all other financial transactions; property acquisitions; day-to-day decisions; contract negotiations; legal matters; selection and hiring of officers, directors, and employees; operating responsibility; cost-control; income and dividend matters; and the rights of other shareholders or partners.

The minority and/or women owners must hold the highest officer position in their companies, example chief executive officer or president.

The minority and/or women must demonstrate that they possess the experience, expertise and knowledge to operate their particular types of business.

Expertise limited to office management, administration, or bookkeeping functions unrelated to the principal business activities of the company is insufficient to demonstrate control. Women and/or minority owners must also verify that they hold any licenses or certification required by the type of business in which they are engaged.

#### **Definitions**

Minority Business Enterprise (MBE) - A for profit business in which at least 51% of the beneficial ownership interest and control are held by a minority or minorities. In the case of a corporation, minorities must hold at least 51% of voting interest.

Minority & Women Business Enterprise (MWBE) - A for-profit business in which at least 51% of beneficial interest and control is held by minority women or by an equal combination of minorities and women. In the case of a corporation, women and minorities must also hold at least 51% of voting interest.

Women Business Enterprise (WBE) - A for-profit business in which at least 51% of beneficial interest and control is held by women. In the case of a corporation, women must also hold at least 51% of the voting interest.

#### **Useful Business Function**

A useful business function is one, which results in the provision of materials, supplies, equipment or services to consumers in the State. A business acting as a conduit to transfer funds to a non-minority business does not constitute a useful business function unless doing so is a normal industry practice.

#### **Benefits of Certification**

Current certified minority and/or women owned firms are eligible to be listed in the State of Delaware Directory of Minority and Women Owned Businesses which is circulated to all state and local government agencies.

#### Recertification

At the ends of three years from original cerification date, firms must submit the recertification affidavit to remain actively visible in the State of Delaware's Minority and/or Women Business Enterprise database.

#### **Eligibility**

A minority and women owned business (sole-proprietorship, partnership, corporation or joint venture) must meet the following criteria:

- a) Belong to a minority group:
   African Americans, Asian/Pacific
   Americans, Hispanic Americans,
   Native Americans, and
   Subcontinent Asian Americans.
   (Please reference above
   definitions)
- At least 51 percent owned, controlled and actively managed by minority group members or by women.
- c) Serving a for profit business with "useful business functions." (*Please reference above definitions*)

**Reasons for denial** (please note the below may include but not be limited to)

- a) A business located in a state other than Delaware must first obtain state-level certification in its home state, if such certification is available. "Home state" is defined as the state the company's headquarters are located.
- b) All securities, which constitute ownership and/or control of a corporation for the purpose of establishing it as a MWBE, must be held directly by minorities or women. No securities held in trust, or by a guardian for a minor, shall be considered as held by a minority or women in determining the ownership or control of a corporation.
- c) If the business operations do not reflect the ownership shown on paper.

- d) Firm is not a for-profit business
- e) Firm has provided false or misleading information
- f) Control will not be deemed to exist in cases of simple majority or absentee ownership, or when a non-minority/non-female owner or employee of the firm is disproportionately responsible for its operation.
- g) The firm shall not be subject to any formal or informal restrictions through, for example through, by-laws provisions, partnership agreements, or charter requirements for cumulative voting rights or otherwise that prevents the minority and women owners, without the cooperation or vote of any owner who is not a minority or women for making a business decision of the firm.
- h) If the owners of the firm who are not minorities or women are disproportionately responsible for the operation of the firm, then the firm is not controlled by minorities and shall not be considered as MWBE within the meaning of the definition. Where the actual management of the firm is contracted out to individuals other than the owner, those person who have the ultimate power to hire and fire the managers, can, for the purpose of this
- i) The certification application was submitted incomplete.

#### **How to Apply**

- Applications and additional information are available by calling the Office of Minority and Women Business Enterprise at (302) 739-4206 or visiting the web site http://omwbe.delaware.gov/
- Complete an application for certification and provide required documentation (ethnic status of minority owner(s), financial records, on-going business activity, etc.)
- Provide access to its business facilities and key personnel for state certification on-site visit.

#### WHERE TO APPLY:

Submit completed applications to:
Office of Minority and Women Business
Enterprise
Haslet Armory
122 William Penn Street
Dover, DE 19901

#### **Frequently Asked Questions**

- Q: Does certification cost money?
- A: No
- Q: Are there any set asides for MWBEs?
- A: No
- Q: Does my certification expire?
- A: At the end of three years from original certification date.
- Q: Will I be notified of all procurement opportunities?
- A: No, however, the OMWBE will continue to research bid opportunities and assist in your effort. We are consistently working on ways to improve communication but strongly encourage you to visit the respective resources.
- Q: What is the best way to communicate with the OMWBE?
- A: Email. Please check your email daily for procurement opportunities.
- Q; Do I have to register with any other agency?
- A: Yes. There are multiple agencies that have their own bidders list. Please check OMWBE's web site for each respective agency. For example, Government Support Services and the Department of Technology and Information have vendor registration processes.

State of Delaware Minority and/or Women Business Enterprise Application *All completed applications must be returned with the appropriate requested documents listed.* 

#### Please type or print clearly

OMWBE use only: Application Date:

Mail application to:
Office of Women and Minority Business Enterprise
Haslet Armory
122 William Penn Street
Dover, DE 19901

If you have any questions regarding the completion of this application, please contact us at (302) 739-4206.

Note – This section must be filled out in its entirety for the application to be processed.

Incomplete applications will not be processed.

incomplete a							
1. Business Name(s), Contact Information	, Federa	ıl Empl	oyee I	[denti	fication N	umber	or Social Security
Number(EIN/SSN)							
Legal Name of Firm:							
Doing Business As (If applicable):							
Federal E.IN or SSN:	E-Mail	Address	:				
Address line 1:							
Address line 2:							
City			State		Zip Code	Coun	itry
Telephone Number:		Extens	ion:	Fax	Number:	1	
Company Web Site Address:				I			
Corp LLC* S Corp Partner	ship	LLP <sup>*</sup>	**	So	ole Proprie	tor	Joint Venture
Date firm was established?		l .		1			
Date firm began doing business (date of first	contract	or sale)					
* Limited Liability Corporation							
** Limited Liability Partnership							
•							
2. Primary owner applicant information							
Name:		Title	:				
Home Address:	City:	·		State	e: Zip	Code:	Country:
Telephone Number:		Exten	sion:	Fax	Number:		
E-Mail Address:				1			
Date owner acquired controlling interest?							
Sex: M F		Ethr	nic Gr	oup:			
U.S. Citizen or Permanent Resident: No		Yes					

	Firm is applying as:			1			
M	linority Business Enter	orise		Women	Business Enterp	rise	
	African American [	Asian Americ	an	Afric	an American	Asian A	nerican
	Hispanic American [	Native Americ	can	Hispa	nic American	Native A	merican
	Subcontinent Asian	Other			ontinent Asian	White A	
				Other			
4	Describe, in detail, wh	at product(s) an	 d/or services v	our husing	ess provides Atts	ach addition	al nages
	nd/or the company's car	_	-		bo provided fitte	uuullivii	haden
	or company o ca		<u>- , 1100, 11 110000</u>				
l							
l							
5.	Five digit North Amer	ican Industry C	lassification Sy	ystem (NA	ICS) Code(s):		
	To assist you in determi	•	•	,			
1.		3.		4.	<i>'</i>	5.	6.
						<u>I</u>	
6	Type of Business						
<u> </u>	Building trade	Manufa	acturer	Othe	r		
H							
╠	Consultant	Supplie		4			
Ļ	Generalized service	Highwa	•				
	Licensed professional	Constru	iction				
	services						
	Provide the following i						rporated), 3)
	Provide the following ifficers, and 4) senior ma		nore space is no		ch additional pa	ges.	rporated), 3)
of						ges.	rporated), 3)
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of Na O	fficers, and 4) senior ma ame fficers of the Company		nore space is no		ch additional pa	ges.	

8. Is any owner or board r same or similar type of			owner or former ov	wner of another firm engaged in the	е
		ntity below)			
9. Are there any written, of firm concerning its own				ssociated in any manner with the Yes	
10. Please list the gross red	reints of la	est two years			
	-	•			
(A) Year Ending:	Gross Re	ceipts:			
(B) Year Ending:	Gross Re	ceipts:			
11. Number of employees		Full time:		1	
<u> </u>		Part time:		1	
		Seasonal (approxi	mate):		
12. List names and titles o	f persons	who perform the f	collowing functions.	. If more than one, indicate what	
percent each person ha	-	•	8	,	
_	Name		Ethnicity	Gender	
Financial Decisions					
Estimating & Bidding					
Negotiating & Contract					
Execution					
Personnel Management					
Field/Production					
Operations Supervisor					
Office Management					
Marketing/Sales					
Purchasing of Major					
Equipment					
Authorized to Sign					
Company Checks (for any					
purpose)					

13. Identify persons or firms	s who provide	Legal, Accounting, an	d Banking service	es:
Attorney:	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Contact:	<u> </u>	
Phone:	Fax:		Email:	
Address:				
Accountant:		Contact:	<u></u>	
Phone:	Fax:		Email:	
Address:		la		
Bank:	Form	Contact:		
Phone: Address:	Fax:			
Address.				
14. If the business is a corpo	ration or LLC	, please list the follow	ing information:	
a. Total shares authorized:		<b>, ,</b>	<b>9</b>	
b. Total shares issued to date:				
c. Are there any restrictions th				
within the By-laws or Articles	s of Incorporation	on, or any other docum	ents?  No Y	es (If yes, please explain
below)				
15 T 1 4 4 1 1	4 4		. 1	O T *
15. List the three largest con			_	-
customer's name and con	mpany or orga	nization, the dollar ar	nount of each cor	ntract or sale, and the date
_	mpany or orga	nization, the dollar ar	nount of each cor	ntract or sale, and the date
customer's name and concompleted. If any are su	mpany or orga	nization, the dollar ar	nount of each cor	ntract or sale, and the date
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customer's name and concompleted. If any are su  1. Company or Individual:  Address, City, State:  Phone:	mpany or orga	nization, the dollar ar	nount of each cor	ntract or sale, and the date u subcontracted.
customer's name and concompleted. If any are su  1. Company or Individual:  Address, City, State:	mpany or orga	nization, the dollar ar	nount of each cor	ntract or sale, and the date u subcontracted.
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customer's name and concompleted. If any are su  1. Company or Individual:  Address, City, State:  Phone:  Description & Amount:  2. Company or Individual:	mpany or orga	nization, the dollar ar	nount of each cor	ntract or sale, and the date u subcontracted.
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customer's name and concompleted. If any are su  1. Company or Individual: Address, City, State: Phone: Description & Amount:  2. Company or Individual: Address, City, State: Phone: Description & Amount:  3. Company or Individual: Address, City, State:	mpany or orga bcontracts, pr	rail:	nount of each cor	ntract or sale, and the date u subcontracted.

16. Has this firm or other firm(s) owned by any of its current owners or officers ever been denied certification by the OMWBE or any other certifying entity (check one)?   No; Yes (If yes, provide the name of the certifying organization and the reason(s) given for denial, below. Attach copies of any relevant documents (letters, appeal documents, etc.).						
17. Debarment						
Is this company, or any other company owned in full or part by any of this company's owners and/or officers, currently debarred from doing business with the State of Delaware? No; Yes.						
/ V						
18. Is the Business certified as a M/W/BE with any other certifying agency? If yes, provide the name(s) of the certifying organization(s), below, and attach letters or other documents verifying such certification.  No Yes						
Name	Date Certified		Expiration Date			
a.						
b.						
c.						
d.						
e.						
f.						
19. How did you hear about the Off	ice of Minority and	l Women Business	Enterprise:			
OMWBE staff speak at an event sponsored by		OMWBE staff at a trade show or expo				
another organization						
OMWBE's web site		Materials published by OMWBE				
Referred by another organization		Referred by the owner of an MBE or WBE				
Delaware state employee		Other, please explain briefly:				

#### **Optional Questions**

You are not required to answer the following questions and the answers will not affect your company's eligibility for certification. However, the answers will help OMWBE to identify business opportunities that may be suited to your company. Answers may be estimated; exact figures aren't necessary.

For all companies				
How many years has your company been conducting business with you as owner?				
How many contracts, subcontracts, and/or sales has your company completed during the last 12 months?				
What is the largest contract, subcontract, or sale your company completed in the past 24 months?				
Has your company done any business with government? No; Yes				
If yes, what level of government (check all that apply): Federal; State; Local				
Has your company done any business with government in the State of Delaware? No; Yes				
Number of government contracts, subcontracts, or sales completed (estimate):				
For Construction-Related Companies Only (not including suppliers of construction materials)				
What is your company's bonding capacity? \$ (indicate "unknown" if you do not know)				
What % of your business is direct contracting?				
What % of your business is subcontracting?				

#### State of Delaware Minority and/or Women Business Enterprise Affidavit

,	****	101010			

#### **Business Name**

Hereafter "the Business" refers to

I understand the illegal nature of receiving public or private funds or other property as a consequence of false representation as to the minority status of the business and do herein certify under penalty imposed by Delaware statutes that the information provided is correct and said information herein may be used for the purposes of certifying the business as a Minority and/or Women Business Enterprise. Any false representation will be grounds for denying certification or initiating decertification in the future.

I agree to make available for inspection to the MWBE office any such materials that may be required to substantiate the degree of minority and women ownership and control of the business. I agree to arrange for onsite inspections of the business' facilities in order to verify information provided in this document.

I agree to provide written information relative to any future change in ownership and/or management of the business to the MWBE office within two weeks of the occurrence of the change. I acknowledge that failure to timely submit required change of status documentation might result in the decertification of the business.

I understand that the certification expiration is three years following the initial date of certification. I further understand that the business must apply for recertification prior to the expiration.

Type or Print Name of Owner				
Signature of Owner	Date			
Title				
Subscribed and sworn to before me this day of	a.d. Month, Year			
SignedNOTARY PUBLIC IN AND FOR THE				
County of	Notary Seal			
State				
My Commission Expires Date				